



ACKNOWLEDGEMENT OF NOTIFICATION
OF HAZARDOUS WASTE ACTIVITY
(VERIFICATION)

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER

+ CT0098109275

WIREMOLD CO THE
777 BROOK ST
ROCKY HILL

CT 06067

INSTALLATION ADDRESS

777 BROOK ST
ROCKY HILL

CT 06067

REQUEST FOR CHANGE

Note: If your company has moved to a new location, then you must submit a new EPA Notification of Hazardous Waste Activity Form and you must obtain a new US EPA Identification Number.

The numbering on this form corresponds to the numbering on EPA Notification of Hazardous Waste Activity Form.

EPA ID Number: CT D098109275

Company Name: WIREMOLD CO THE

Date of Request: 1/14/00

Town: ROCKY HILL

SECTION/ITEM TO BE CHANGED	CURRENT INFORMATION	CHANGE INFORMATION TO:	REASON/COMMENTS
I. Name of Installation			
II. Location of Installation			
III. Mailing Address of Installation			
IV.a. Installation Contact's Name	STEPHEN SOUTH	CARLOS A DELOUREIRO	PER 99 SQG REPORT
b. Installation Contact's Title	ENVR SPEC	ENVR ENGINEER	
c. Installation Contact's Phone			
V.a. Ownership			
b. Property Owner			
VI. Status Originally notified as: (please circle) CESQG (<100 kg/month) SQG (100 - 1000 kg/month) LQG (>1000 kg/mth) Transporter T/S/D Facility		Change Status to:	

68

2.11.00

10/90

REQUEST FOR CHANGE

EPA ID #: CTD 098109275

COMPANY NAME: Wiremold Co The

Date of Request: 5/30/91

Rocky Hill

TOWN: _____

	SECTION/ITEM TO BE CHANGED	OLD VALUE	NEW VALUE	REASON/COMMENTS
I*	Name of Installation			
II**	Location of Installation		7/23/91 RCRIS	
III	Installation Mailing Address		7/23/91 [initials]	
IV a.	Installation Contact's Name	Levesque Richard	Stephen South	per 1990 fee payment form
b.	Installation Contact Title	Engr	Environmental Spec.	
c.	Installation Contact Phone #			
V a.	Ownership			
b.	Property Owner			
VI	Status	(Originally notified as:) SQG (<100 kg) SQG (100-1000kg) GENERATOR TRANSPORTER TSDF	Change status to:	

* Corresponds to numbering on EPA Notification of Hazardous Waste Activity Form.

** If your company has moved to a new location then you must submit a new EPA Notification of Hazardous Waste Activity Form and obtain a new US EPA ID No.

REQUEST FOR CHANGE

EPA ID #: CTD 098109275

COMPANY NAME: Wiremold Co The

TOWN: Rocky Hill

4/90
~~3/90~~

SECTION/ITEM TO BE CHANGED	OLD VALUE	NEW VALUE	REASON/COMMENTS
* I Name of Installation			
II Location of Installation			
III Installation Mailing Address		60 Woodlawn St West Hartford CT 06110	
IV a. Installation Contact's Name	Thomas, Charles	Levesque, Richard	1989 SQ6
b. Installation Contact Title	Plant mgr	Plant Engineer	
c. Installation Contact Phone #			
V a. Ownership			
b. Property Owner			
VI Status	(Originally notified as:) SQG (<100kg) SQG (100-1000kg) GENERATOR TRANSPORTER TSDF	Change status to:	
X EPA Waste Number(s) TSD Facility Process Changes (handling methods).			

* Corresponds to numbering on EPA Notification of Hazardous Waste Activity Form.

SW
5/19/87

GENERATOR

EPA DATA BASE (PRINTOUT) UPDATE FORM

Region #: 1

CT DEP Staff: Sharon Cousins

State: OF CONNECTICUT

Date: 4 / 9 / 86
Month Day Year

Month Day Year

Report Type: ☒ Generator
☐ Facility

Facility

Wiremold Company The #

EPAID Number CITD:001145143

[illegible]

United States Environmental Protection Agency
Washington, DC 20460

Notification of Hazardous Waste Activity

Please refer to the Instructions for Filing Notification before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).

For Official Use Only

Comments

C
C

Installation's EPA ID Number

Approved

Date Received
(yr. mo. day)C
FT/A C
1

880802

I. Name of Installation

T H E W I R E M O L D C O

II. Installation Mailing Address

Street or P.O. Box

C
3

7 7 7 B R O O K S T

City or Town

State

ZIP Code

C
4

R O C K Y H I L L

C T 0 6 0 6 7

III. Location of Installation

Street or Route Number

C
5

7 7 7 B R O O K S T

City or Town

State

ZIP Code

C
6

R O C K Y H I L L

C T 0 6 0 6 7

IV. Installation Contact

Name and Title (last, first, and job title)

Phone Number (area code and number)

C
2

T H O M A S, C H A R L E S

P L A N T M G R 2 0 3 2 3 3 6 2 5 1

V. Ownership

A. Name of Installation's Legal Owner

B. Type of Ownership (enter code)

C
R

T H E W I R E M O L D C O

P

VI. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes. Refer to instructions.)

A. Hazardous Waste Activity

B. Used Oil Fuel Activities

- ☒ 1a. Generator ☒ 1b. Less than 1,000 kg/mo.
- ☐ 2. Transporter
- ☐ 3. Treater/Storer/Disposer
- ☐ 4. Underground Injection
- ☐ 5. Market or Burn Hazardous Waste Fuel (enter 'X' and mark appropriate boxes below)
- ☐ a. Generator Marketing to Burner
- ☐ b. Other Marketer
- ☐ c. Burner

- ☐ 6. Off-Specification Used Oil Fuel (enter 'X' and mark appropriate boxes below)
- ☐ a. Generator Marketing to Burner
- ☐ b. Other Marketer
- ☐ c. Burner
- ☐ 7. Specification Used Oil Fuel Marketer (or On site Burner) Who First Claims the Oil Meets the Specification

VII. Waste Fuel Burning: Type of Combustion Device (enter 'X' in all appropriate boxes to indicate type of combustion device(s) in which hazardous waste fuel or off-specification used oil fuel is burned. See instructions for definitions of combustion devices.)

☐ A. Utility Boiler☐ B. Industrial Boiler☐ C. Industrial Furnace

VIII. Mode of Transportation (transporters only — enter 'X' in the appropriate box(es))

- ☐ A. Air ☐ B. Rail ☐ C. Highway ☐ D. Water ☐ E. Other (specify)

IX. First or Subsequent Notification

Mark 'X' in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your installation's EPA ID Number in the space provided below.

- ☒ A. First Notification ☐ B. Subsequent Notification (complete item C)

C. Installation's EPA ID Number

A. Hazardous Wastes from Nonspecific Sources. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from nonspecific sources your installation handles. Use additional sheets if necessary.

[illegible]

B. Hazardous Wastes from Specific Sources. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific sources your installation handles. Use additional sheets if necessary.

[illegible]

C. Commercial Chemical Product Hazardous Wastes. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

[illegible]

D. Listed Infectious Wastes. Enter the four-digit number from 40 *CFR* Part 261.34 for each hazardous waste from hospitals, veterinary hospitals, or medical and research laboratories your installation handles. Use additional sheets if necessary.

[illegible]

E. Characteristics of Nonlisted Hazardous Wastes. Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles. (See 40 CFR Parts 261.21 — 261.24)

- ☒ 1. Ignitable
(D001) ☒ 2. Corrosive
(D002) ☐ 3. Reactive:
(D003) ☐ 4. Toxic
(D000)

XI. Certification

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Signature Charles E. Thomas

Name and Official Title (type or print)
Charles Thomas
Plant Manager

Date Signed
7/28/88

RECEIVED

AUG 02 1988

HAZARDOUS MATERIALS
MANAGEMENT UNIT